

# MONROE COUNTY, FLORIDA

## JOB DESCRIPTION

**Position Title:** Firefighter EMT

**Date:** January 28, 2006

**Position Level:**

**FLSA Status:** Nonexempt

**Class Code:**

### GENERAL DESCRIPTION

*(The information on this description has been designed to indicate the general nature and level of work performed by employees within this classification. It is not designed to contain or be interpreted as a comprehensive inventory of all duties, responsibilities and qualifications required of employees assigned to this job.)*

Protects life and property, in compliance with County policies and procedures, by controlling and extinguishing fires, performing emergency medical techniques (Basic Life Support) and patient care procedures, responding to disasters and other emergencies, and maintaining department equipment, apparatus and station. Participates in fire prevention activities and training to improve public awareness of fire safety. Drives and/or operates fire rescue apparatus or ambulances. On call 24 hours pending disasters.

### KEY RESPONSIBILITIES

1. Responds to fire alarms and other emergency calls. Operates firefighting and EMS apparatus and equipment. Contains, suppresses and extinguishes fires; rescues potential victims and protects property. May act as the Incident Commander, Branch Director, or Group Supervisor.\*
2. Administers emergency medical techniques (Basic Life Support) in accordance with protocols. Assists the Firefighter Paramedic or Paramedic as required. Communicates with dispatch and receiving hospitals.\*
3. Inspects, cleans and maintains personal protective ensemble, assigned apparatus and equipment, and station to ensure operational readiness.
4. Inspects, tests and maintains fire wells and hydrants; learns fire well, hydrant, and other water supply locations. Learns layout of the response area and facilities; collects information for pre-incident planning.
5. Inspects buildings to detect fire hazards and issues forms to building owners, listing fire regulation violations to be corrected.
6. Conducts training and drills of fire department operations and procedures with volunteer firefighters as required.
7. Conducts tours of fire stations and demonstrates fire equipment. Presents and/or participates in fire prevention, first aid, CPR classes, and education programs to improve public awareness of fire safety. Promotes and participates in public information and education relating to emergency medical services and the health care system in general. Assists in responding to, and reporting citizen inquiries or complaints.
8. Performs recording activities to include, but not limited to: writing memos and summaries; reporting volunteer attendance; completing incident and patient care reports; and reporting equipment and apparatus defects.\*
9. Works shift and call back (and/or overtime) to meet department needs. On call 24 hours pending disasters.\*
10. Keeps abreast of and complies with County policies, department rules and regulations, standard operating procedures, and EMS protocols. Attends training, company drills, and administrative sessions as required.
11. Performs other similar and related duties as required.

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\*Indicates an “essential” job function

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### KEY JOB REQUIREMENTS

<b>Education:</b>	Vocational or other technical school, certification, training or apprenticeship required beyond high school: Must have the following: State of Florida Firefighter Minimum Standards Certification pursuant to Florida Statutes, Chapter 633, or comply with same within one year of date of hire. Florida certified Emergency Medical Technician or Paramedic, and current CPR and EVOC certifications.
<b>Experience:</b>	1 year prior related work experience as a firefighter or volunteer firefighter preferred, preferably in Monroe County. Trained, experienced and otherwise qualified to drive fire apparatus and emergency medical care vehicle, maintain the appropriate class of driver's license and completion of an approved EVOC course in accordance with Florida Statutes.
<b>Impact of Actions:</b>	Makes recommendations or decisions which usually affect the assigned department, but may at times affect operations, services, individuals, or activities of others outside of the assigned department.
<b>Complexity:</b>	Work is non-standardized and widely varied requiring the interpretation and application of a substantial variety of procedures, policies, and/or precedents used in combination. Frequently, the application of multiple, technical activities is employed; therefore, analytical ability and inductive thinking is required. Problem solving involves identification and analysis of diverse issues.
<b>Decision Making:</b>	Supervision is present to establish general objectives relative to a specific project, to outline the desired end product and to identify potential resources for assistance. Independent judgment is required to identify, select, and apply the most appropriate of available guidelines and procedures, interpret precedents, and adopt standard methods or practices to meet variations in facts and/or conditions.
<b>Communication with Others:</b>	Regular internal and external contacts required to carry out programs and to explain specialized matters. Occasionally requires contacts with officials at higher levels on matters requiring cooperation, explanation and persuasion or with the public involving the enforcement of regulations, policies and procedures.
<b>Managerial Skills:</b>	Has responsibility or authority which is limited to the direction of temporary or lesser certified workers.
<b>Working Conditions/Physical Effort:</b>	Work requires extreme physical exertion and/or physical strain to the point of physical fatigue. Work environment involves exposure to job hazards where there is a high possibility of injury.
<b>Other:</b>	Must be a non-user of tobacco products for at least one (1) year immediately preceding application, and sign a sworn statement attesting to this fact as required by Florida Statutes.

### APPROVALS

**Department Head:**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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*Division Director:*

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*County Administrator*

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_